AUG 2 6 2004

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Sugan J. Sidwell (Depositor's name (Signature Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/666,164	09/18/2003	David Corven	706676US1	7080

TITLE OF INVENTION: CAPLESS FLUID RESERVOIR

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DOUGLAS, STEVEN O 3751 141-346000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment is 1827/2004 AWONDAF2 00000046 031800 10666164  (A) NAME OF ASSIGNEE  DatimlerChrysler Corporation  Please check the appropriate assignce category or categories (will not be printed on the patent);  Auburn Hills, Met FC: 1504 300.00 DA  Please check the appropriate assignce category or categories (will not be printed on the patent);  Acheck in the amount of the fee(s) is enclosed.  Ye Publication Fee (No small entity discount permitted)  Advance Order - # of Copies	nonprovisional	NO	\$1330	)	\$300 \$1630		11/19/2004		
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CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) stacked.  C "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  C ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or typo)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment 08/27/2004 AUONDAF2 00000046 031800 10666164  (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)  DaimlerChrysler Corporation Auburn Hills, Mo2 FC: 1504 300.00 DA  3. The following fee(s) are enclosed:  Ab. Payment of Fee(s):  EXISTING FOR COLOR TRY)  A check in the amount of the fee(s) is enclosed.  Payment by credit card, Form PTO-2038 is attached.  D Advance Order - # of Copies	DOUGLAS, STEVEN O		3751		141-346000		-		
(A) NAME OF ASSIGNEE  DaimlerChrysler Corporation  Auburn Hills, Med FC:1501 1330.00 DA  Auburn Hills, Med FC:1504 300.00 DA  Please check the appropriate assignce category or categories (will not be printed on the patent); Individual XX corporation or other private group entity Individual XX corporation or o	CFR 1.363).  Chunge of correspondaddress form PTO/SB/ PTec Address* indicate PTO/SB/47; Rev 03-02 Number is required.  ASSIGNEE NAME AN	dence address (or Change of C 122) attached. tion (or "Fee Address" Indica or more recent) attached. Us D RESIDENCE DATA TO E	Correspondence tion form e of a Customer	(1) the na or agents (2) the na registered 2 registere listed, no The PATENT	mes of up to 3 reg OR, alternatively, me of a single firm altorney or agent) id patent attorneys name will be printe I (print or type)	(having as and the name or agents. If d.	at attorneys 1 RALP.  a member a 2  nes of up to no name is 3		
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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is not claiming SMALL ENTITY status. Sec, e.g., 37 CfR 1.27(g)(2).

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